

November 18, 2003

**THE NATIONAL HEALTH LAW PROGRAM OPPOSES THE MEDICARE CONFERENCE BILL**

The National Health Law Program has represented the health care interests of low income citizens of all ages for over thirty years, seeking to insure that the elderly and disabled, among others, are not short changed by the legislative process simply because they cannot afford insider lobbyists to press their interests. NHeLP opposes the Medicare bill proposed by the conference committee because, despite claims to the contrary, its meager prescription drug benefit will in fact require most seniors to pay between 53% and 70% of their current drug costs. In return for this stingy assistance, the proposed bill will undermine the very foundations of both Medicare and Medicaid, the two most successful health programs in the history of this country, in ways that virtually guarantee that the elderly and disabled will pay dearly in ten years for the pittance they are being offered today.

The hidden cap on Medicare expenditures in the proposed bill will take effect exactly when the bulk of the baby boom generation becomes eligible for Medicare. The combination of increased demand and decreased financing will guarantee a cut in Medicare services in the next decade. For all Medicare recipients, this will represent a broken national promise. But for low income beneficiaries, who lack the resources to pay for the services that will no longer be available, the inevitable cut back in coverage truly represents a health care disaster waiting to happen.

Further, for low-income Medicare beneficiaries, participation in the prescription drug plan will not be voluntary. Despite Senator Frist's promise to the contrary, the poorest Medicare beneficiaries will not be allowed to stay where they are if they don't like the Medicare drug coverage being offered.

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Rather, states can require these beneficiaries, who presently receive Medicaid to supplement their Medicare coverage, to join the Medicare drug plan if they want to continue to get Medicaid. But now, even though these poorest beneficiaries will be forced to participate in the Medicare drug plan, they will no longer be able to get Medicaid to cover what Medicare does not. Instead, they will simply have to go without those drugs that their doctors say they need but Medicare will not cover.

NHeLP, along with the vast majority the community that truly cares about the plight of this country's poorest citizens, cannot in good conscience support a bill that causes so much harm in return for so little good.

Laurence Lavin

Executive Director

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